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PTO/SB/21 (09-04)

TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/020,461
Filing Date	December 14, 2001
First Named Inventor	M'Saad, Hichem
Art Unit	1731
Examiner Name	Hoffmann, John M.
Total Number of Pages in This Submission	17
Attorney Docket Number	A6123/T43700

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
	<input type="checkbox"/> CD, Number of CD(s) _____	
	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Milani M. Vinnola		
Date	November 4, 2005	Reg. No.	45,979

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Aurora Lowell	Date	November 4, 2005

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On November 4, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: Aurora Lowell  
Aurora Lowell



PATENT  
Attorney Docket No.: A6123/T43700  
AMAT No.: AMAT  
006123/USA/DSM/HDP/CVD/JW  
TTC No.: 016301-043700US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

HICHEM M'SAAD et al.

Application No.: 10/020,461

Filed: December 14, 2001

For: METHOD OF MANUFACTURING  
AN OPTICAL CORE

Customer No.:

Confirmation No. 9343

Examiner: Hoffmann, John M.

Technology Center/Art Unit: 1731

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed August 18, 2005, please enter the following amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 10 of this paper.